

DEPARTMENT OF FOOD AND AGRICULTURE

Meat and Poultry Inspection Branch
1220 N Street
Sacramento, CA 95814
(916) 654-0504
79-008A (Rev 12/04)

Distribution:
White - Headquarters
Yellow - Inspector
Pink - Area Supervisor

Date _____

LIVESTOCK MEAT INSPECTOR LICENSE APPLICATION**FEE \$25.00**

In accordance with Article 5 and 6, Chapter 4.1, Division 9, of the California Food and Agricultural Code, application is hereby made for a license to act as a Livestock Meat Inspector (LMI). *Please Print*

Applicant Name _____

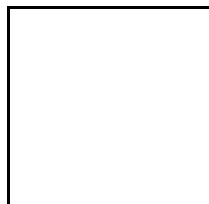
Street Address _____

City, State, Zipcode _____

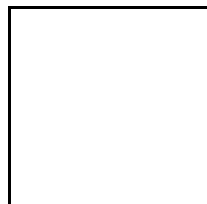
Home Phone _____ Work Phone _____ FAX Number _____

Sex: ☐ F ☐ M Height: ____' ____" Date of Birth ____/____/____ Weight ____ lbs. Hair: _____ Eyes: _____Do you speak and/or understand English? ☐ Yes ☐ No If not, what language(s) do you speak and/or understand? _____

ATTACH TWO RECENT PHOTOGRAPHS (Color photographs only, size should be at least 1" x 1 1/4", frontal view of face, use tape on the back of picture, do not use glue or staples.



Tape Photo Here



Tape Photo Here

Plant name and address where LMI training and written, oral, and demonstration examinations can be given: _____

I understand the authority vested in this license is restricted to use in Custom Livestock Slaughterhouses licensed in California.

Licenses will be issued by the Department only to qualified persons who have passed written, oral, and demonstration examinations. Any changes in information provided above must be reported to the Meat and Poultry Inspection Branch within 15 days. Obtaining all information requested is mandatory and required before a license can be issued according to requirements in Division 9 of the California Food and Agricultural Code. In accordance with the Governor's Executive Order B-22-76, each individual has the right to review files maintained on them by the Meat and Poultry Inspection Branch, unless exempted under Section 4 of this Executive Order.

Mail application and Twenty-five dollar (\$25.00) fee to: Cashier, Department of Food and Agriculture, 1220 N Street, Room A-125, Sacramento, CA 95814. You may retain a copy for your records.

Printed Name of Applicant _____

Signature of Applicant _____